



WORK EXPERIENCE INCENTIVE PROGRAM WORKSITE REMOVAL REQUEST

I am requesting that youth _____, Client ID# _____ be removed from the _____ worksite for the following reasons:

Effective Date: _____

Worksite Supervisor

Date

OR

Case Manager/Group Leader

Date

OR

Work Program Coordinator

Date

WPC Date of Receipt: _____

Staffing Date: _____

Reason for Removal:

☐ Result of Staffing

☐ Poor Performance Evaluation

☐ Major Violation Report

☐ Serious Incident

Original to: Work Program Coordinator

Copies to: Worksite Supervisor
Parent/Guardian (off-campus only)
Youth Portfolio